

# CREDIT APPLICATION

Schwank  
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**Schwank**  
 INNOVATIVE HEATING SOLUTIONS



COMPANY NAME / DBA (if different):

ADDRESS: Street / P.O. Box:

City: State / Prov: Zip / Postal Code:

Phone: Fax: Email:

Federal tax ID or Social Security Number (US Customers only):

Type of business:  CORPORATION  PARTNERSHIP  SOLE PROPRIETORSHIP  
 CONTRACTOR  WHOLESALE  DISTRIBUTOR

Date business established:

Amount of credit requested: \$

Are you sales tax exempt? (if applicable, please fax copy)  NO  YES #

Have you ever had credit with us before?  NO  YES Date:

Purchase order required?  NO  YES

## TRADE REFERENCES

|                |                     |
|----------------|---------------------|
| Reference #1   | Name:               |
|                | Address:            |
|                | Phone:              |
|                | Fax: Email Address: |
| Reference #2   | Name:               |
|                | Address:            |
|                | Phone:              |
|                | Fax: Email Address: |
| Reference #2   | Name:               |
|                | Address:            |
|                | Phone:              |
|                | Fax: Email Address: |
| Bank Reference | Account #:          |
|                | Phone: Fax:         |
|                | Contact Person:     |
|                | Name of bank:       |
|                | Address:            |

AUTHORIZED SIGNATURE:

PRINTED NAME:

TITLE:

DATE:

## GENERAL TERMS AND CONDITIONS

1. Invoices are mailed after order has been shipped. Our terms of payment are net 30 days.
2. All invoices if not paid by the end of the 30-days are considered past due.
3. A service charge of 2% per month will be added to all amounts invoiced if not paid by the end of the 30 days.
4. No additional credit will be extended to pas due accounts unless satisfactory arrangements are made with our credit department.